

July 30, 2001

PERSONAL EXPLANATION

HON. CAROLYN C. KILPATRICK

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Monday, July 30, 2001

Ms. KILPATRICK. Mr. Speaker, I am sorry that I was not here to cast my vote on Roll Call Vote No. 289, Representative Menendez's amendment to H.R. 2620, last Friday. If I had been here, I would have voted "yea" on this amendment.

PERSONAL EXPLANATION

HON. JOE BACA

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Monday, July 30, 2001

Mr. BACA. Mr. Speaker, I regret that due to an airline delay, I was unavoidably detained arriving from my district in California, and missed three votes this evening (July 30, 2001).

Had I been present, I would have voted AYE on the following rolls:

Roll 290, H. Res. 212, expressing the sense of the House of Representatives that the World Conference Against Racism, Racial Discrimination, Xenophobia, and Related Intolerance presents a unique opportunity to address global discrimination.

Roll 291, H. Res. 191, expressing the sense of the House of Representatives that the United Nations should immediately transfer to the Israeli Government an unedited and uncensored videotape that contains images which could provide material evidence for the investigation into the incident on October 7, 2000, when Hezbollah forces abducted 3 Israeli Force soldiers, Adi Avitan, Binyamin Avraham, and Omar Souad.

Roll 292, H. Con. Res. 190, supporting the goals and ideals of National Alcohol and Drug Addiction Recovery Month.

INTRODUCTION OF THE NURSING HOME QUALITY PROTECTION ACT

HON. HENRY A. WAXMAN

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Monday, July 30, 2001

Mr. WAXMAN. Mr. Speaker, today I am introducing the Nursing Home Quality Protection Act. It is imperative that we do everything in our power to protect our most vulnerable citizens—the elderly and disabled who live in nursing homes. That is why I and my colleagues are introducing this legislation today—to take a crucial first step towards ensuring that seniors in nursing homes are provided the care they deserve.

This legislation is a product of a series of investigations reports conducted by my staff into nursing home conditions. These reports have consistently found numerous violations of federal health and safety standards in nursing homes throughout the country. Many of the violations harmed residents. Common prob-

EXTENSIONS OF REMARKS

lems included untreated bedsores; inadequate medical care; malnutrition; dehydration; preventable accidents; and inadequate sanitation and hygiene.

Moreover, during the course of these investigations, we began to notice an unexpected and extremely disturbing trend. Many of the nursing homes we examined were being cited for physical, sexual, or verbal abuse of residents. I asked my staff to investigate whether these abuse cases were isolated occurrences—or whether they signaled a broader, nationwide problem. The report I released today presented the results of this investigation.

What we found was shocking. Within the last two years, nearly one-third of the nursing homes in the United States have been cited by state inspectors for an abuse violation. In over 1,600 nursing homes—approximately one out of every ten—these abuse violations were serious enough to cause actual harm to residents or to place them in immediate jeopardy of death or serious injury.

As documented in the report, we found examples of residents being punched, choked, or kicked by staff members or other residents. These attacks frequently caused serious injuries such as fractured bones and lacerations. And we found other examples of residents being groped or sexually molested.

We also found that the percentage of nursing homes cited for abuse violations has doubled since 1996. I hope that this is the result of better detection and enforcement. To its credit, the Clinton Administration launched an initiative in 1998 to reduce abuse in nursing homes, and this initiative may be responsible for some of the increase in reported cases of abuse.

But I am concerned that some of the increase in abuse cases may reflect an actual increase in abuse of residents. In 1997, Congress unwisely decided to repeal the Boren Amendment, which guaranteed that nursing homes receive adequate funding. Since then, federal funding has not kept pace with the costs of providing nursing care. As a result, it is harder and harder for nursing home operators to provide seniors the kind of care they need and deserve.

I know many operators of nursing homes who are dedicated to providing the best care possible. They would never knowingly tolerate abuse or other dangerous practices in their facilities. But unless we are willing to pay nursing homes enough to do their job, intolerable incidents of abuse and other types of mistreatment will continue to persist in too many nursing homes.

I do not want to suggest that most residents of nursing homes are being abused. The vast majority of nursing staff are dedicated and professional people who provide good care. In many instances, the only reason that abuse is even reported is because of the actions of conscientious staff members.

On a personal note, my mother-in-law is in a nursing home in Maryland. I've met with many of the people that care for her. They are good people, but they have difficult jobs. They work long hours in understaffed conditions, and they don't make a lot of money. Under such trying circumstances, it's not surprising that staff turnover is high and that facilities are

forced to hire people who shouldn't be working in nursing homes.

But the bottom line is clear: Something clearly needs to be done to improve nursing home conditions. The senior citizens who live in nursing homes are frail and vulnerable. Frequently, they are defenseless and cannot even report problems to others. They deserve to be treated with respect and dignity—not to live in fear of abuse and mistreatment.

It would have been intolerable if we had found a hundred cases of abuse; it is unconscionable that we have found thousands upon thousands.

That's why I and many other members are introducing the Nursing Home Quality Protection Act later today. Our bill is a comprehensive approach to improving conditions in our nation's nursing homes. The bill would:

Increase resources to nursing homes so they can hire more staff;

Institute minimum nurse staffing requirements;

Impose tougher sanctions on poorly performing nursing homes;

Require criminal background checks on employees; and

Increase Internet disclosure of nursing home conditions.

This is a good piece of legislation that has been endorsed by organizations representing nursing home residents and workers. It will do much to improve the quality of care received by the one and a half million people who live in our country's nursing homes.

I want to assure all Americans who have a family member in a nursing home that we will do all we can to protect their aging loved ones. They helped our generation when we needed their help. And now it's our turn—and our obligation—to make sure they can live safely and without fear.

30TH ANNIVERSARY OF OLDER AMERICANS ACT NUTRITION PROGRAMS

HON. CHARLES B. RANGEL

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Monday, July 30, 2001

Mr. RANGEL. Mr. Speaker, I rise today to introduce H. Con. Res. 199 that celebrates the 30th anniversary of the Older Americans Act Nutrition Programs to occur in March 2002. I wish to first commend the National Association of Nutrition and Aging Services Program (NANASP) and my good friend Bob Blancato for their work on behalf of this resolution. I hope all my colleagues and the many national, state and local aging organizations will join in support.

In 1972, Congress passed legislation authored by my friend and colleague, Senator EDWARD M. KENNEDY of Massachusetts, to establish for the first time a federal program to provide senior citizens with daily meals served either in congregate settings or in their home. It was viewed then as an important federal initiative to address the growing number of "at risk" seniors who faced hospitalization or time in a nursing home due to malnutrition and poor diet.

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